United States District Court Southern District of New York

	17CV 5746
VALMIKI RAMANI	T. O. A. O. T.
Write the full name of each plaintiff.	(Include case number if one has been
	assigned)
-against-	COMPLAINT
Joanne	— Do you want a jury trial? □ Yes No
Write the full name of each defendant. If you need more	g & 37
space, please write "see attached" in the space above and attach an additional sheet of paper with the full list of	
names. The names listed above must be identical to those	• 1
contained in Section II.	의 유

NOTICE

The public can access electronic court files. For privacy and security reasons, papers filed with the court should therefore *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number. See Federal Rule of Civil Procedure 5.2.

I. BASIS FOR JURISDICTION

subject of the foreign state of

Federal courts are courts of limited jurisdiction (limited power). Generally, only two types of cases can be heard in federal court: cases involving a federal question and cases involving diversity of citizenship of the parties. Under 28 U.S.C. § 1331, a case arising under the United States Constitution or federal laws or treaties is a federal question case. Under 28 U.S.C. § 1332, a case in which a citizen of one State sues a citizen of another State or nation, and the amount in controversy is more than \$75,000, is a diversity case. In a diversity case, no defendant may be a citizen of the same State as any plaintiff.

What is the basis for federal-court jurisdiction in your case?

₩ Federal Question
☐ Diversity of Citizenship
A. If you checked Federal Question
Which of your federal constitutional or federal statutory rights have been violated? HARRASS MENT and DISCRIMINATION IN MAINTING MY MUSIC VIDEO Channel ON YOUTUBE — UALMIKÍ INTERNATIONAl SONGS ALOVE
B. If you checked Diversity of Citizenship
1. Citizenship of the parties
Of what State is each party a citizen?
The plaintiff, Mourube LLC, is a citizen of the State of San Brund Caly Donia 94066 901 CHE ARY AVE (State in which the person resides and intends to remain.)
or, if not lawfully admitted for permanent residence in the United States, a citizen or

If more than one plaintiff is named in the complaint, attach additional pages providing information for each additional plaintiff.

If the defendant is a	n individual:		
The defendant,(D	efendant's name)		, is a citizen of the State of
or, if not lawfully as subject of the foreig		t residence in the U	Jnited States, a citizen or
If the defendant is a	corporation:	•	
The defendant,	louTube	LLC, is inc	corporated under the laws of
the State of	Calyora	ia	 .
and has its principa	al place of business in t	the State of <u>Cal</u>	JORMA .
or is incorporated u	under the laws of (forei	gn state)	U
and has its principa	al place of business in	901 CHERT	Ly AVE San Bruno Ca 940
If more than one def		•	ditional pages providing
II. PARTIES			
A. Plaintiff Inform	nation		
Provide the following pages if needed.	; information for each p	olaintiff named in th	ne complaint. Attach additional
First Name	Middle Initial	Last Name	
Street Address			
county, City of Processing	esent but	State	Zip Code
	ork_	NONE	, , , , , , , , , , , , , , , , , , ,
Telephone Number		Email Address (if a	ivaliable)

B. Defendant Information

To the best of your ability, provide addresses where each defendant may be served. If the correct information is not provided, it could delay or prevent service of the complaint on the defendant. Make sure that the defendants listed below are the same as those listed in the caption. Attach additional pages if needed.

		ſ			
Defendant 1:	Uou	Tube LLC			
•	First Name	Last Name			
	online	medice			
	Current Job Title (or	other identifying information)			
	901 Ct	terry Hul			
	Current Work Addres	ss (or other address where defer	ndant may be served)		
	GAN BRI	und CA	74066		
	County, City	State	Zip Code		
Defendant 2:					
	First Name	Last Name			
	Current loh Title (or	other identifying information)			
	Current dot ritle (of	other identifying information,			
	Current Work Address (or other address where defendant may be served)				
	County, City	State	Zip Code		
Defendant 3:					
	First Name	Last Name			
	Current Job Title (or other identifying information)				
	-				
	Current Work Address (or other address where defendant may be served)				
	County, City	State	Zip Code		

Defendant 4:				
	First Name	Last N	lame	
	Current Job Title (c	or other identifying	g information)	
	Current Work Add	ress (or other addr	ress where defend	dant may be served)
	County, City		State	Zip Code
III. STATEME	NT OF CLAIM	,		į
Place(s) of occurr	rence: OW	Line	- <u>V</u> a	Tube
Date(s) of occurre	ence: 2015	· - 0	Resen	
FACTS:				
State here briefly harmed, and who additional pages	at each defendant prif needed. ad My Som you Tube song title	Song was which "	which I the Site You don' Seeing I	Thave to say
I'M F	ideos ud		gan up L	pading oTher
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275 H	ational S > Videos	s. When	rever I c	ip Loadavideo
a copy (- THUMBIN	ail) 90.	es onto	my chansel
or by	rus Typ	ing my	full was	wi JALMiles
KAMANI	into you	Tube 13	nowsell	all Ho Videos
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are co	vers d	DIVER O	aku158.	Sorgs and 50

a copy of the thumbrail will appear under that
a copy of the thumbrail will appear under that aptient site for that Song. This, is customary and
Standard practice within the industry Some of the songs
have copy oright commond voulube through apparatement
with the owners aclowine to us their material once they theown
con soley Monetize the videos. Mygarvarica against
Usu Tube is that Since publishing the filest song to the Law
one yesterday July 26 2017 They have been constant.
taking the videos from of the host ARTIST site afteraday
problem - HeLP athe battom of page and send feedb. INJURIES: are two options which wash of times.
If you were injured as a result of these actions, describe your injuries and what medical
treatment, if any, you required and received.
This has been fraustrating-because once the videos
has been placed they should not be taken down on
moved Jurthor back in the site I am being discommated
and happassed by you Tube ILC for what is my
halita is my attaction as not have occontation
Iv. RELIEF I am at my Limit of their practice to stop
IV. RELIEF I am at my Limit & their practice.
State briefly what money damages or other relief you want the court to order.
I wish you have to stop the practiced not
placing my uploady videos, of namoving them of ten
they have been positioned on HOSE AREIST - OR
Twish you Tube to stop the practiced not placing my uploady videos, of removing them of ter they have been positioned on Hoso ARTISD - or other governd Song/Site And if the count
other govered Song/Sive And if the count See fit & award me any punetation
awande that may some also

FORM SSA-1099 - SOCIAL SECURITY BENEFIT STATEMENT

Box 1. Name VALMIKI D RAMANI			Box 2. Beneficiary's Social Security Number 562-94-8011	
Box 3. Benefits Paid in 2016	Box 4. Benefits Repaid to SSA in 2016 NONE UNT IN BOX 3 DESCRIPTION		Box 5. Net Benefits for 2016 (Box 3 minus B	
\$9,240.00			\$9,240.00	
DESCRIPTION OF AMOUNT			CRIPTION OF AMOUNT IN BOX 4	
Paid by check or direct deposit Benefits for 2016	\$9,240.00 \$9,240.00		NONE	
	en e	Box 6. Voluntary Fe	ederal Income Tax Withheld	
			NONE	
		Box 7. Address		
		VALMIKI D F APT 6D 13905 85TH I JAMAICA NY	PRIVE	
		Box 8. Claim Number	er (Use this number if you need to contact SSA.)	

V. PLAINTIFF'S CERTIFICATION AND WARNINGS

By signing below, I certify to the best of my knowledge, information, and belief that: (1) the complaint is not being presented for an improper purpose (such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation); (2) the claims are supported by existing law or by a nonfrivolous argument to change existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Federal Rule of Civil Procedure 11.

I agree to notify the Clerk's Office in writing of any changes to my mailing address. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Each Plaintiff must sign and date the complaint. Attach additional pages if necessary. If seeking to proceed without prepayment of fees, each plaintiff must also submit an IFP application.

July 27 2	017	Odmil V	cmon
Dated <		Plaintiff's Signature	
UALMIKI	\mathcal{J}	RAMANI	·
First Name	Middle Initial	Last Name	
139-05	85 DRII	12 Apr 61)
Street Address		₩	-
BRIARWOOD	NY	11435	
County, City	State	Zip Code	
718-271-2	978	UALMIKI . D	· Ra GMail. Com
Ťelephone Number		Email Address (if available)	9

I have read the Pro Se (Nonprisoner) Consent to Receive Documents Electronically:

If you do consent to receive documents electronically, submit the completed form with your complaint. If you do not consent, please do not attach the form.